



## Fact Sheet:

# Healthy Families



### Background

In California it is estimated that approximately 1.5 million low-income children do not have health coverage. These children receive minimal preventive healthcare, and instead rely on episodic and emergency care. As a result, they are at increased risk of having undetected health problems and more serious health-related consequences.

To address this significant health issue, the California Legislature enacted the Healthy Families Program (HFP). Administered by the Managed Risk Medical Insurance Board (MRMIB) and partially funded by a federal block grant (Title XXI), private sector health insurance coverage is now available to an estimated 500,000 children aged 0-18 who fall within 100-250 percent of the federal poverty level (\$16,450 to \$41,125 for a family of four). Medical, vision, dental, mental health, and substance abuse treatment benefits are provided to enrolled children through existing health care provider networks. As of mid-1999, there were almost 145,000 children enrolled.

### Substance Abuse Treatment Benefits

The substance abuse treatment benefit allows inpatient hospitalization as medically appropriate and up to 20 outpatient visits per year for crisis intervention and treatment of alcoholism or drug abuse.

### Legislative Reports

In response to authorizing legislation, MRMIB (in consultation with ADP) prepared

two reports on the viability of providing additional substance abuse treatment services (beyond the scope of the existing benefit) to children enrolled in the HFP. These reports were submitted to the Legislature in April 1998 and September 1999.

The April 1998 report recommended that additional data be collected before pursuing Title XXI funding for additional or expanded substance abuse treatment benefits under the HFP. Specifically, data was needed on the number of HFP children utilizing the substance abuse treatment benefit, the number of children who needed services that exceed the scope of the benefit, and the number of children who requested substance abuse treatment from the publicly-funded county system after utilizing their existing HFP benefit.

The September 1999 report summarized the information obtained from health plans participating in the HFP and county alcohol and drug programs. The report concluded that there was still insufficient data to determine the adequacy of the substance abuse benefits provided through the HFP. Existing data systems are not designed to identify or track the information needed, and there has not been a sufficient number of subscribers to capture reliable data. Additional time is required before the benefit can be adequately assessed.